PTO/SB/17(modified) (10-03)
Approved for use through 07/31/2006. OMB 0551-0032
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FEE TRANSMITTAL for FY 2005

Effective 10/01/2003. Patent fees are subject to annual revision

Applicant claims small entity status. See 37 CFR 1.27 (\$) 1440TOTAL AMOUNT OF PAYMENT

Complete if Known					
Application Number	09/502,313				
Filing Date	2/11/2000				
First Named Inventor	Keith Rose				
Examiner Name	Campen, Kelly				
Art Unit	3691				
Attorney Docket No.	1142				

METHOD OF PAYMENT (check all that apply)				FE	EE CALCULATION (continued)		
Check Credit card Money Other None	3. ADDITIONAL FEES						
Deposit Account:	<u>Large</u>	Entity	Smal	<u> Entity</u>			
Deposit Account Number		Fee (\$)	Fee Code	Fee (\$)	Fee Description		
		130	2051	(+)	Curebargo lata filing foo or oath	Fee Paid	
Deposit Account Charles E. Gotlieb	1051 1052	50		65 35	Surcharge-late filing fee or oath Surcharge - late provisional filing fee or	— —	
Name			2052	25	Surcharge - late provisional filing fee or cover sheet	—	
The Director is authorized to: (check all that apply)	1053 1812	130 2520	1053 1812	130 2520	Non-English specification		
Credit any overpayments			ı		For filing a request for ex parte reexamination Requesting publication of SIR prior to	——	
Charge any additional fee(s)	1804	920	1804	920	Requesting publication of SIR prior to Examiner action		
harge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1840	1805	1840	Requesting publication of SIR after Examiner action		
	1251	120	2251	60	Extension for reply within first month		
FEE CALCULATION		460	2252	230	Extension for reply within second month		
1. BASIC FILING FEE Large Entity Small Entity	1253	1050	2253	525	Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid	1254	1640	2254	820	Extension for reply within fourth month	\vdash	
Code (\$) Code (\$)	1255	2230	2255	1115	Extension for reply within fifth month	 	
1001 1030 2001 515 Utility filing/search/exam	1401	510	2401	255	Notice of Appeal		
1002 360 2002 180 Design filing/search/exam	1402	510	2402	255	Filing a brief in support of an appeal		
1003 570 2003 285 Plant filing/search/exam	1403	1030	2402	515	Request for oral hearing		
1004 810 2004 405 Reissue filing/search/exam					, ,		
1005 210 2005 105 Provisional filing fee	1451		1451	1510	Petition to institute a public use proceeding	\vdash	
SUBTOTAL (1) (\$)	1452	510	2452	255	Petition to revive - unavoidable	\vdash	
	1453		2453	770 720	Petition to revive - unintentional	1440	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Claims below Fee Paid	1501 1502	1440 820	2501	720 410	Utility issue fee (or reissue)	1440	
Total Claims			2502	410	Design issue fee	\vdash	
Independent 3"	1503	1130	2503	565	Plant issue fee		
Claims 2 - 3 - = ^ =	1460	130 50	1460 1807	130 50	Petitions to the Commissioner	 	
Multiple Dependent =	1807			. 50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Stmt		
Fee Fee Fee Fee Description Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1202 50 2202 25 Claims in excess of 20	1809	810	2809	405	Filing a submission after final rejection (37 CFR 1.129(a))		
1201 210 2201 105 Independent claims in excess of 3						\vdash	
1203 370 2203 185 Multiple dependent claim, if not paid	1810	810	2810	405	For each additional invention to be examined (37 CFR 1.129(b))		
1204 210 2204 105 **Reissue independent claims over original patent	1801	810	2801	405	Request for Continued Examination (RCE)		
1205 50 2205 25 **Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expediated examination of a design application		
		fee (sp					
SUBTOTAL (2) (\$) **or number previously paid, if greater; For Reissues, see above	*Red	uced b	y Basic	Filing Fe	ee Paid SUBTOTAL (3) (\$)	1440	

SUBMITTED BY		(Complete (if applicable))				
Name(Print/Type)	Charles E. Sotlieb	Registration No. (Attorney/Agent)	38,164	Telephone	650-328-0100	
Signature	Smalls E. DU			Date	4/28/2008	

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PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Fee(s) Transmittal. Thi ers. Each additiona	s certif	icate cannot be used for	domestic mailings of to r any other accompanying t or formal drawing, mu	nρ
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	00000050 09502313			•	Г	1111	2	MAN	(Signatur	e)
l FC:1501	1440.	00 OP			4	1/28/2008			(Dat	e)
APPLICATION NO.	FILING DATE		<u></u>	FIRST NAMED INVEN	ITOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
09/502,313 TILE OF INVENTION	02/11/2000 : METHOD AND APPA	RATU	S FOR RECEIVI	Keith Rose NG A SUBSCRIPTIO	N FO	OR A SECURITY		1142	4981	
APPLN. TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE	OUE	PREV. PAID ISSUI	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1440	\$0		\$0		\$1440	07/18/2008	
EXAM	INER	_	ART UNIT	CLASS-SUBCLASS	3	•				•
AKINTOLA,	OLABODE		3691	705-036000						
Change of correspondence address or indication of "Fee Address" (37 FR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						<u> </u>	
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to						_ 	
ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE	PRINTED ON	THE PATENT (print o	or typ	e)		·		_
PLEASE NOTE: Unl recordation as set fort (A) NAME OF ASSIC	ess an assignee is identi in in 37 CFR 3.11. Comp	fied bel letion o	ow, no assignee f this form is NO	data will appear on t T a substitute for filing (B) RESIDENCE: (C	g an a	issignment.			ument has been filed for	or
Charles Schwab				San Francisco, C		and STATE OR C	OUNT	KI)		
ease check the appropri	ate assignee category or	categori	es (will not be pr		_	Individual 🔲 Co	rporatio	on or other private grou	p entity Governmen	nt
a. The following fee(s) are submitted: State Stat			4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number							
_	rus (from status indicated s SMALL ENTITY statu			_				ITY status. See 37 CFR		_
OTE: The Issue Fee and terest as shown by the	Publication Fee (if requeecords of the Uhited State	ired) wi	ill not be accepted	from anyone other th	an th	e applicant; a regis	tered at	ttorney or agent; or the	assignee or other party i	in
Authorized Signature	(halles		SUR				28/200			-
Typed or printed name	Charles E. Gotl	ieb		· ·		Registration N	o. <u>38,</u>	164		

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